



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5765

|                                    |                                                           |                     |                               |                                        |
|------------------------------------|-----------------------------------------------------------|---------------------|-------------------------------|----------------------------------------|
| <b>SERIAL NUMBER</b><br>10/680,603 | <b>FILING OR 371(c) DATE</b><br>10/06/2003<br><b>RULE</b> | <b>CLASS</b><br>422 | <b>GROUP ART UNIT</b><br>1753 | <b>ATTORNEY DOCKET NO.</b><br>652782-5 |
|------------------------------------|-----------------------------------------------------------|---------------------|-------------------------------|----------------------------------------|

## APPLICANTS

Komad Parsa, Laguna Niguel, CA; ✓

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/402,279 03/27/2003 which is a CON of 10/194,628 07/12/2002 PAT 6,585,809 ✓

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

12/30/2003

\*\* SMALL ENTITY \*\*

|                                                                                          |                                                                                                                                                                                                                           |                               |                            |                           |                                |
|------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature _____ Initials _____ | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>3 | <b>TOTAL CLAIMS</b><br>20 | <b>INDEPENDENT CLAIMS</b><br>1 |
|------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------|---------------------------|--------------------------------|

## ADDRESS

Brian M. Berliner  
 O'MELVENY & MYERS LLP  
 400 South Hope Street  
 Los Angeles, CA90071-2899

## TITLE

Multi-sectional system for continuous gas separation

|                                   |                                                                                                                   |                                                                                                                                                                                                                                                                                 |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FILING FEE RECEIVED</b><br>385 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|